



The Radiogram

Volume 11 No. 2

Summer 2003

I hope you are all having a good summer! Fall will be here soon, and we will all need to get back to business. There are several exercises, including the annual SET (Simulated Exercise Test). I hope all of the teams are planning on participating in the exercise. Give some thought to coordinating with other teams and putting on a regional exercise. It really helps to work out the communication glitches ahead of time. You might actually have to talk to that other town or county in a real disaster! 73 N7LSL, editor

TOP OFF 2—After-Action Report—King County Medical Services Team

The King County team of W. WA. Medical Services Communications participated in the federally sponsored terrorism exercise TopOff 2 (Top Officials), which took place in Seattle and Chicago on May 12-16, 2003. The Seattle/King County scenario was the explosion of a radiological dispersion device (RDD, otherwise known as a dirty-bomb), in south Seattle at approximately noon on May 12. Mission # 03-T-1112.

Objectives: Our primary objective was to provide backup communication for the participating hospitals in King County. Medical Services team assigned radio operators to each participating hospital in support of the exercise.

The sixteen participating hospitals were engaged in the longest exercise they have ever experienced. Several of them, (around 6-7), were staffed by hospital personnel and radio operators from at least noon to 6 PM. This was a very manpower-intensive drill, which many of the hospitals have reported was an extremely valuable experience.

There were two objectives specifically designated for the Medical Services team:

- Test the activation of the Medical Services team by contacting the Seattle Emergency Management duty officer, through the Seattle Fire dispatch center. This procedure has been documented for several years, but never tested.
- Test the ability of the radio operators to report to

(Continued on page 3)

TOP OFF 2—Pierce Co Medical Services Team—After Action Report

On May 12, 2003 the Pierce County Medical Services team was activated to help support the hospitals and health care facilities during the federally-run exercise. The exercise was predominantly run in King County, with a lower level of response in Pierce County.

The facilities that participated and that were staffed with ham radio operators were: St. Joseph's hospital, St. Clare hospital, Good Samaritan hospital, Pierce County Health Department, and Franciscan Tacoma South clinic as well as the Gig Harbor clinic. Ten operators were staffing these above facilities.

A net was initiated on the 443.825 88.5 repeater which was Internet linked with 147.57 MHz as well as the 442.625 103.5 Baldy repeater. This allowed wide-area communications. Communications were established at all of the facilities. Digital packet communication was established between The Health Department, Good Samaritan Hospital, ECRT, and the EOC. Keyboard to keyboard conversations were tested. All operators were able to access their respective facilities without any problems. All operators reported that the facility staff members welcomed them. More and more staff and facilities are becoming aware of the asset that amateur radio provides.

Tacoma General was unable to participate secondary to equipment and manpower problems.

The Franciscan Tacoma South Medical Clinic located at 96th and Hosmer Street in Tacoma has no ham radio equipment installed. Equipping them

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ARES Medical Services Team Mission Statement

The role of the Medical Services Communications Team, affiliated with the Western Washington Amateur Radio Emergency Service, is to provide vital emergency communications between medical facilities in the community, local governments, and other emergency management agencies during disaster situations, when normal communications are inoperable or disrupted, utilizing amateur radio voice or digital networks, and other appropriate communications media.

The use of this amateur radio network and team is intended strictly for emergency purposes, to support the medical needs of the community-at-large. This network and team will be exercised on a regular basis to conduct training of appropriately licensed amateur radio operators, and to educate the medical community and other user groups and agencies on utilization of amateur radio during emergency situations.

The Radiogram

**Newsletter of the W.
WA. Medical Services
Teams
Published by:**

**W. WA. Medical Services
Communications
P.O. Box 15624
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(Comments or address changes
to above address)

MST TEAM NEWS

Western Washington Medical Services Communications, is incorporated under **IRS TID 91-1869349**. The non-profit corporation provides oversight, training, and fund-raising for all of the Medical Services Communications teams. Grants are being solicited for capital expenses to equip all of the hospitals with up-to-date radio equipment, and for other projects. Donations are tax-deductible.

Anyone wishing a copy of the Articles of Incorporation and By-laws can request one from n7lsl@arrl.net.

Current Officers and Directors:

President: Marina Zuetell, N7LSL
Vice-Pres: Allan Kush, WV7R
Secretary: Carlos Smith, AA7SB
Treasurer: Dave LeFevre, KC7FEC

Board Members:
Chris Jones, N7ZW
Duane Mariotti, WB9RER
Mark Sheppard, N7LYE
Wayne Shinoki, KC7SYA
Ned Worcester, KB7NFO

Web Pages of Interest

**W. WA. Medical Services
Teams:**
<http://www.ww7mst.org>

**City of Seattle Emergency
Management and ACS:**
<http://www.ci.seattle.wa.us/seattle/eoc/acs/>

**ARRL Emergency Coordinators
Certification program**
<http://www.arrl.org/cce>

**Washington State ARES/
RACES**
<http://www.sinclair.net/ares/>

Team Jackets Available!!

The new team jackets are navy blue with jade lining and trim light-weight shells, suitable for indoor or summer wear. The team logo is custom-embroidered on the back, and your name and call-sign on the front.

We have negotiated a special price of \$68.00, if we order 4 at a time.

Please contact Marina Zuetell, N7LSL for ordering information or pick up a form at the next training meeting.

Team Shirts and Hats

Shirts and hats, with the new team logo are available for sale now.

Golf shirts are available in navy or natural, S to XL, for \$23; XXL \$25. Navy blue baseball caps – \$12. Optional customization is additional. Call or E-mail for additional information or an order form.



Centers for Disease Control
<http://www.cdc.gov/>

**Homeland Security—the
Official Web page**
<http://www.dhs.gov/dhspublic/>

**FEMA Training Classes—new
Web site:**
[Http://training.fema.gov/EMIWeb/IS/crslst.asp](http://training.fema.gov/EMIWeb/IS/crslst.asp) for the Independent Study courses
(There are some new class listings)

Top-Off After-Action Report*(Continued from page 1)*

their assigned locations and get through the expectedly high security measures at each hospital. Each member of the Medical Services team should have a photo-ID issued by the City of Seattle,

Communications Protocols:

Med-Net control operated on the linked W7SRZ system, with 146.90 -/R (103.5) being the primary frequency. Additional frequencies linked in were: 443/550+/R (103.5). We also were offered the use of the 147.08 repeater for ordering supplies, blood, pharmaceuticals, medical supplies. Med-Net control also used the 6 M repeater: 53.330 -/R (100.0) for EOC to EOC communications, and packet (digital radio) on the 145.01 SEA node.

Lessons Learned:

- Our primary objective, supporting the communication needs of the hospitals, was met with enthusiasm and professionalism. These operators demonstrated the skills they have learned through many hours of training. Even the large number of new team members responded in an extremely professional manner, and all are to be congratulated.
- Objective #2, - calling out the team through the Seattle Fire Dispatch center was discouraged by the Seattle Emergency Management Department. This was not an element they wanted to test at this time. It will still need to be tested at a later date.
- Objective #3 – The ability of radio operators to pass security perimeters with their Seattle ID, was met to a moderate level.. Many of the operators passed through security before the exercise was initiated and secure perimeters established. Ninety

percent of our operators were provided with official Seattle ID prior to the event.

- Hospital Control was transferred to Overlake Hospital in the middle of the drill. This was the first time this was attempted, and both the staff at Overlake and the Amateur Radio operators did quite well with this unusual assignment. Overlake is the official backup hospital control, so this portion of the exercise was well worth the effort.
- The six-meter repeater used for communicating between EOCs worked beautifully. This was the first time this frequency band has been used for this purpose, and was very useful in inter-agency communications. This left the normal 2M/440 frequencies freed up for tactical communications. Med-Net communicated with State EOC, King Co. EOC, and Seattle EOC.
- Med-Net also used 2M-packet radio (digital communications) to exchange information with State EOC and King CO EOC. Seattle EOC was never able to get their packet station functioning. We believe that packet radio has a great deal of potential for communicating patient lists, medical and pharmaceutical supplies, or anything that requires precise documentation or is lengthy and detailed. This would relieve the load on the voice communications currently employed. Voice communication got heavily bogged down due to heavy traffic volume. We will be recommending acquisition of packet radio equipment for the hospitals in the near future.
- Med-Net admits to a very confusing interpretation of the patient distribution data. Harborview distributed the victims in the field to the hospitals as per standard practice, and, initially,

the information was interpreted as numbers of patients, and then ages of patients. Halfway through the exercise, Med-Net realized that the numbers that Harborview was broadcasting were Triage tag numbers. "32 yellow, 29 red" was misinterpreted, and Med-Net regrets the confusion caused to the radio operators. This will not happen again.

- Harborview had scripted supply messages for the blood bank, medical, and pharmaceutical supply agencies that participated in the drill, but these messages were never injected into the communication scenario, due to other drill issues that were occurring. This was unfortunate, for we had anticipated giving those teams some practice and experience. One request from the blood bank to Harborview went unanswered. As a result, we were not able to test the element of shifting supply orders off to a different repeater frequency. Learning from this experience will be to plan for primary and secondary methods of injecting scripted message traffic into an exercise.
- There were equipment issues at a couple of sites, but there were also several new sites on the network. We continue to work toward repairing outstanding equipment problems and encourage additional new equipment at hospitals still lacking installed radio equipment.

Summary & Statistics:

On the whole, this exercise was one of the best tests ever experienced by the Medical Services Team. It went far longer than any past exercises, and had the full participation of every hospital playing which served to enhance the relationships between

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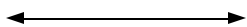
Changes in ARES Leadership

Western Washington gets new Section Manager: Veteran ARRL Western Washington Section Manager Harry Lewis, W7JWJ, is stepping down as of July 1.

Assistant Section Manager Ed Bruette, N7NVP, of Poulsbo--the only candidate who had filed to succeed Lewis in the fall--will fill the remaining three months of Lewis's term. ARRL Field and Educational Services Manager Rosalie White, K1STO, announced Lewis's early departure and Bruette's nomination June 26. "Your work as Section Manager for more than a dozen years has touched many people for the good of Amateur Radio," White said in praise of Lewis's tenure as SM.

A ham since the 1940s, Lewis has served as Western Washington Section Manager since January 1991. Lewis will continue as Technical Coordinator. He had indicated earlier this year that he would not seek another term as SM, and Bruette was running unopposed for the Section Manager's seat.

Lewis's wife, former Northwestern Division Director Mary Lewis, W7QGP, also is leaving her current post as a Western Washington Assistant Section Manager. Bruette has been an ASM since January 2003 and was Section Emergency Coordinator from 1998 through 2002. He is also the Washington State RACES officer.



Restructuring and Redistricting for ARES in Washington State

As of August 1, 2003, the ARES districts have been realigned to conform with the Regional Homeland Security Coordination Districts. These new districts also coincide to the Hospital Bioterrorism Planning and Coordination Districts.

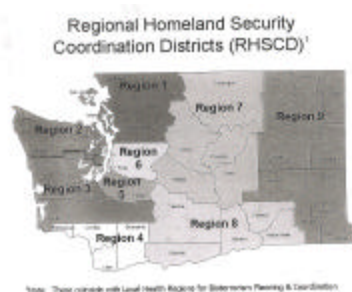
Several of the districts are unchanged from the previous system, but others are changed, and two new DEC's have appointed.

Western Washington:

- Region 1—Island, San Juan, Skagit, Snohomish, Whatcom—unchanged
- Region 2 — Clallam, Jefferson, Kitsap
- Region 3 — Grays Harbor, Lewis, Mason, Pacific, Thurston
- Region 4 — Clark, Cowlitz, Skamania, Wahkiakum
- Region 5 — Pierce—new DEC Mark Yordy, W7BBO
- Region 6 — King —new DEC Kirk Bellar, N7UK

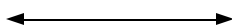
Eastern Washington:

- Regions 7, 8, and 9
- Under the newly revised WA.



State RACES plan, each of the District Emergency Coordinators also becomes a Regional RACES Radio Officer. See the Web page for the new RACES Plan: <http://emd.wa.gov/6-rr/riforms-pubs/com/races/01-racesplan-idx.htm>

The designation for the W. WA. Medical Services Team has changed from District 6 to Region M, and still covers all of the counties in W. Washington.



HIPAA Regulations and Amateur Radio Communicators

W. WA. Medical Services Communications is developing a training module around the recently implemented HIPAA regulations, concerning patient confidentiality and privacy.

HIPAA stands for Health Insurance Portability and Accountability Act of 1996, Public Law 104-191.

Hospitals and health care organizations, insurance companies, and all business associates of the hospitals have been working on plans to secure the confidential health information of all of their patients for several years. In recent months, certain portions of the act were finalized and compliance mandated. Other portions of the act will be phased in as legislation is finalized.

Basically, any information concerning a patient in a health-care setting, which can be individually identified with the patient is considered "Protected Health Information" (PHI). This information may not be disclosed in any format, without the express permission of that patient.

Why does this involve amateur radio operators?

Team members of Medical Services Communications, and others who are assigned to provide communication in the health-care setting, or at the scene of a mass-casualty incident, may be in a position to overhear, or oversee, protected patient information, as a part of their assignment. The radio equipment that they use is often located in, or near the emergency room, or other patient-care areas. This training module will inform them of their duties and responsibilities to be discreet, and maintain the patient's privacy.

Pierce Co Top Off 2, cont.

Continued from page 1

with an emergency station was difficult. This is the first time the facility had participated in such a drill. A portable station was setup in a filing office located in the center of the building. A mobile radio and mag-mount antenna that was cross-band repeated from a vehicle outside made communications possible. The facility was using FRS radios to communicate inter-facility. I was handed a document to transmit to St. Joe's hospital. It was a new form that relayed staffing and facility status. MST had never seen this form before, and it took a very long time to relay the information via radio. The job got done and or net control did a great job of relaying the data, it did get passed on.

The MST recommends that minimally the Tacoma South Clinic install a dual band rooftop antenna, with a coax run to the appropriate room. We recommend that a VHF and UHF mobile be installed with a power supply. Due to the amount of data that we communicated, we recommend a computer and packet radio system as well, with a second rooftop antenna. We would also like to supply copies of their new staffing document to all of the MST members for future reference to make communications faster.

I would like to have seen more facilities participate and more use of the digital packet network. I have heard from numerous volunteers that they were unhappy that little to no information had been passed to them regarding the exercise, a few decided not to participate in the previous days to the exercise. I stressed that this will be a good reality test.

Over all, the exercise was worth the time. We learned about

the limitations of Internet linking, and discovered some propagation problem areas of town and how to get around them. We were able to talk to Med Net control in King County, and talk to Saint Francis in Federal Way. We will work on these areas of improvement in our upcoming SET, which will be announced. We will also utilize some different bands and include the ECRT to relay video.

The operation began at 0900 and ended at 1515. We were not being utilized much in the afternoon and ended the net at 1515. Net control was run by N7LMV at the Pierce County Health Department.

- Pat Nicholson, N7WGR
EC, Pierce CO Medical Services



Preparedness officials to build prototype of disposable hospital 07/24/2003

A Pittsburgh-area counter-terrorism task force has been charged by the federal government with building a 150-bed prototype of a portable, disposable hospital designed to care for victims of bioterrorism, the Pittsburgh Post-Gazette reports.

The federally funded project, to be launched in Monroeville next month, will build a 6,000-square-foot Emergency Isolation Treatment Shelter that could be quickly transported and assembled in the wake of a bioterror attack, natural disaster, or outbreak of an infectious disease like SARS. The prototype shelter is composed of 50-inch-square polymer composite panels that are treated with an antimicrobial paint, which allows health care officials to rid the panels of "any known infectious agent that patients might bring with them to the shelter," says the president of the Virginia-based company that de-

(Continued on page 6)

King Co Top Off 2 , cont.

(Continued from page 3)

hospital staff and the radio operators. This was the longest exercise that the hospital and the operators have experienced, lasting from noon to 6 PM at several sites.

Operators were able to experience operating under the HEICS (Hospital Emergency Incident Command System) activation at each hospital facility. The message traffic was fairly fast-paced and of sufficient volume that Med-Net was quite busy. The team attempted, and succeeded in utilizing additional frequencies and communication protocols for the first time. These additional modes provide us with increased flexibility and depth of communication ability. Some of this capability should be added to each facility, such as digital, or packet, radio.

We incorporated many newer members into the exercise, trying to partner them with experienced team members, but at several sites the operators were all new, and they performed admirably under difficult and complex circumstances.

A total of 55 radio operators participated in this exercise in support of 16 hospitals; the Public Health department; the blood bank; and two medical/pharmacy suppliers. Most of these radio operators volunteered to take a day of unpaid leave or vacation from their employment. They contributed a total of 360-plus hours and about 466 miles of driving to reach their assignments.

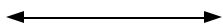
- Marina Zuetell, N7LSL
DEC, Medical Services Teams

Around the Region

Pat Nicholson, N7WGR, MST Emergency Coordinator for Pierce Co. has graduated from his EMS Paramedic course, and is working for AMR in the Chehalis area.

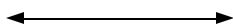
The Pierce Co team will be conducting an orientation to the local hospitals in the next month. Team members will also be credentialed at that meeting.

The tower for the Brown's Point repeater will be installed at the end of August.



Pete Apgar, KB7TGF, EC for Kitsap MST, is on a 7 -week trip through Alaska, via RV. While he is gone, Mike Vineyard, KE7XG and Leon Newkirk, KD7ABV , will be covering for him until he returns on Sept 24.

Pete also gets to go to a FEMA Certification course in Maryland in September. Great opportunity!



Medical Services Team Expansion

President and DEC Marina Zuetell, N7LSL, and Duane Mariotti, WB9RER, from Harborview Medical Center, have been making a series of presentations around the region, talking to hospital staff and ARES/RACES teams.

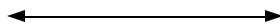
The purpose of the talks is to introduce "Today's Emergency Department Communication Systems", and provide an "Overview of the W. Washington Medical Services Communications".

New commercial and amateur radio systems will soon be installed at many hospitals, as part of a Department of Health grant from the CDC. These radios will need trained operators, and the Medical Services team wishes to develop hospital teams within the existing ARES/RACES team.

Island Co. RACES Team

John Acton, K7ACT is the newly appointed RACES RO for Island Co. and he is starting to recruit members to join the team there.

The team will be using the Skagit Valley RACES night net on Wednesday nights at 7 PM on the 145.190 repeater at least for a while. Anyone in Island County that is, or would like to become a member of RACES, can send John an email or give him a call on the repeater (146.860).
John Acton, K7ACT
R.O. Island County
k7act@hotmail.com



Disposable Hospital

(Continued from page 5)

signed the materials for the shelter. However, since "public confidence in the cleanliness of the structure might nonetheless be shaken" in the event of a bioterrorist attack or infectious disease outbreak, the materials can be burned at temperatures 100 degrees higher than those needed to burn wood-releasing only harmless carbon dioxide and hydrogen into the atmosphere." The final model of the shelter will house 500 beds and will be able to be assembled by 25 unskilled laborers in 72 hours.

Eventually, materials for the disposable hospitals could be distributed to communities across the U.S. And at a cost of \$525,000 apiece, the shelters would be "relatively cheap...to destroy," the Post-Gazette notes, adding that it cost \$30 million to decontaminate the Senate Hart Office Building in the wake of the 2001 anthrax attacks (Snowbeck, 7/22).

Kristi L. Koenig, MD, FACEP
Emergency Management
Strategic Healthcare Group
Department of Veterans Affairs

EMERGENCY NETS Washington State Emergency Net

Mon. - 6:30 p.m.

Sat. - 9:00 a.m.

3.985

W. WA. Medical Services Team Net

Thurs - 20:00

146.90-/R (103.5)

Linked to 443.550+/R (103.5)

Pierce Co. MST

Tues—2000 (exc. 2nd Tues)

443.825 (88.5)

Island Co. ARES Net

Wed - 19:00 145.190 - /R

King Co. ARES Net

Sun. - 20:00

146.820 - /R (103.5)

Jefferson Co. ARES Net

Tues—16:30

145.15 -/R (114.8)

Kitsap Co. ARES Net

Sun. - 19:30

145.430 - /R (179.9)

Mason Co. ARES Net

Sun. - 21:00

146.720 /R (103.5)

Pierce Co. ARES Net

Tues. - 19:00

145.37 - /R (136.5)

San Juan Co. ARES Net

Wed. - 20:00

146.90 /R (131.8)

Snohomish Co. ARES Net

Sun. - 20:30

146.920 -/R (123.0)

Thurston Co. ARES Net

Tues. - 19:00

147.36 + /R

Whatcom Co ARES Net

Sun. - 19:00

147.16 + /R (103.5)

(corrections to the Net list need)



The following dates and topics are planned for the 2003 Medical Services Team Training Schedule. They are tentative and could change due to circumstances beyond our control. Please mark these dates in your calendar so you can plan to attend. Confirming notices will be mailed out prior to each class. Dates of other significant training events are included for your reference

2003 Medical Services Team Training Schedule

1/25/03 Introduction to ARRL Emergency Communications Level 1 course – Homework!
Connector party for Anderson Powerpole 12v DC connectors
Annual MST Membership meeting – Election of Officers

Feb 1? **First Aid/CPR/BBP refresher** - 8 hour course \$\$

3/1/03 Completion of ARRI EMComm Level 1 course, and testing.

3/8/03 *Mike & Key Hamfest*

3/22-23/03 Communications Academy 2003

4/22-23/03 *WSEMA Partners in Emergency Preparedness Conference – Bellevue*

4/??/03 TBD *KCSARA Spring Training Academy – McKnight Middle School*

4/??/03 TBD *KCSARA Spring Training Academy – McKnight Middle School*

4/26/03 Introduction to the Hospital Environment
TopOff 2 Briefing

5/12-16/03 TopOff 2 Exercise –

5/30-31 *Military Medical Readiness Conference – Sea-Tac Marriott*

6/7/03 TopOff 2 Debriefing

6/28-29/03 ***Field Day***

8/4/03 Joint Picnic with ARES of King County, Seattle ACS, and Medical Services
Potluck at Woodland Park or? Site TBD.

9/13/03 Helicopter Awareness - Refresher

9/27-28/03 *KCSARA Fall Training Academy – McKnight Middle School*

10/11-12/03 *KCSARA Fall Training Academy – McKnight Middle School*

10/4/03 Fall Medical Services Team Exercise – Annual SET-
(Joint exercise with Seattle ACS, followed by a picnic/BBQ and debriefing)
probable NDMS – All Services exercise – multi-county exercise

11/15/03 Strategic National Stockpile (formerly National Pharmaceutical Stockpile)

12/20/03 TBD – Joint meeting with Seattle ACS
Holiday party

Pierce Co, and other county training for Medical Services are still being worked out.



Emergency Communications Team
12501 E Marginal Way S
M/S ASB1 – Facilities
Tukwila, WA. 98168

TIME VALUE MAIL

Announcements

- W. WA. Medical Services Team finally have a Web presence at: **<http://www.ww7mst.org>**. The site is still under development, but this will be a good place to look for training dates and information, recruiting information, links to related sites, etc. There will be team-members only section that will have forms, and other non-public information. Thanks to several team members for their assistance in developing it.
- W. WA. MST also now has a listserv that can be used to exchange news and information, distribute newsletters and bulletins, etc. **ww7mst@roundthestars.net**.
- The next training in King County, and open to all, is scheduled for September 13th. The topic will be Helicopter Safety and Awareness Refresher. We hope to have it at the Airlift NW base at Boeing Field, but this is not confirmed yet.

- There will be a SET exercise for Medical Services on October 4. There may be an NDMS component involving multiple counties, but the details have not been confirmed yet. The King County MST and Seattle ACS will do a joint exercise as part of it, but we hope to incorporate multiple teams into it to test our communications. More to come on this later.



McChord AFB— Offloading “patients”
NDMS Exercise 2001